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'A Very Dangerous Medical Experiment': CDC Expands Vaccine Schedules for Kids, Pregnant Women and Most Adults

The Centers for Disease Control and Prevention published its 2023 vaccine schedules, which include at least 31 shots for children and teens. Dr. Paul Thomas of Epoch Times reviewed the expanded schedule for the risk of safety or efficacy without a licensee.

By John Michael Dumais

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The Centers for Disease Control and Prevention (CDC) is recommending more vaccines and more doses for children, teens, pregnant women and adults, according to the agency's 2023 immunization schedules.

The updated schedule triggered a flurry of news and reactions in recent days. However, the CDC failed to mention that nearly 12 months of the latest vaccines that he paved up insurance payments for newly recommended vaccines, the American Academy of Pediatrics reported.

The 2024 schedules include newly authorized vaccines for preventing COVID-19, respiratory syncytial virus (RSV), and chikungunya disease.

The shots amounts to nothing more than a very dangerous medical experiment hoisted on America's infants and children," said Brian Hooker, Ph.D., senior director of science and research at Children's Health Defense (CHD) and co-author of "The Wuhan Cover-Up."

Hooker said the defender the CDC has never tested the efficacy or the safety of the entire childhood vaccination schedule.

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Integrative physician Dr. Mary Holly Sutton told The Defender, "The CDC continues to function as a powerful promoter of vaccines, not as a protector of public health."

According to Sutton, who lost her license in three states for writing vaccine exemptions in California before she became a doctor, "The CDC ignores vaccine effectiveness and a lack of officially accepted research on their adverse effects. She said:

> The CDC could give every guidance on vaccines but has so far accepted NO[t] efficacy studies for any of the vaccines. Instead, they rely on observational studies, case-control placebo controls, and secretly, to such human trials of any kind.

"The said such a plan by many medical professionals, the CDC and the vaccine industry are deceived and placed at risk."

Commenting on the expanded vaccine schedule, Dr. Michelle Perro, a pediatrician and co-author of "What's Making our Children Sick?" told The Defender, "It's on average. It's not necessary, and they're hurting our children."

Physicians for Informed Consent
@drmichaelcarr
#CDC's that in the U.S. many physicians and their staff are
#COVID19 #vaccine #vaccination #vaccinations #flu
increased risk of #vaccine side effects Pearson general
consultation #vaccine is encouraged by the CDC? Read more:
covidvaccinetalk.com/blog/
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Perro critiqued the financial incentives offered to doctors to vaccinate as many people as possible, and the reprisals against doctors for writing exemptions.

Pat
@PatHoganMy Life · Follow
Pediatricians are bribed as well and this has been going on
for a very long time. Not just the U.S. but nobody wanted
to care about that...and...
Pediatric offices will kick kids/families out of their practice
for not following the latest CDC childhood vaccine
schedule."
Charles Hoskin Jr. @realCharlesHoskin
Replying to @PatHoganMy and @DrTedros
Yet, not a single word from Pfizer, Fauci and his scientists, not
a thing. 🤔
As always, follow the money.
Industry $$$ Inside Vaccine Administered
COVID-19 Vaccine Provider Incentive program
Today, in order to get a COVID-19 vaccine, you must be a part of a large provider network or a pharmacy. Vaccine providers are paid by insurance companies, the government, or the patient receiving the vaccine. To make it easy, here are the payment rates for COVID-19 vaccines:
• Medicare: $40 per vaccine administered
• Medicaid: $40 per vaccine administered
• Uninsured: $40 per vaccine administered
• Private insurance: $110 per vaccine administered
• Pediatric vaccines: $110 per vaccine administered
The Department of Health and Human Services has also set aside $1 billion to reimburse providers who administer COVID-19 vaccines to uninsured patients. Uninsured patients will be able to get one shot of the new vaccine. The government will pay $110 per vaccine administered.
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Childhood 18-19 vaccine schedule

After carefully reviewing the new CDC schedule, CHD's science team determined the likely minimum number for children ages 0-18 to be 76 doses of 18 different vaccines.

The number of doses could reach as high as 90, depending on the vaccine formulation being used and other factors.

By comparison, the CDC in 1983 recommended 11 doses of 7 vaccines by age 16, including the MMR (measles, mumps, rubella), DTP (diphtheria, tetanus, pertussis) and polio vaccines.

New immunizations on the childhood schedule include

- RSV: Nirsevimab (RSV-mAb, brand name Beyfortus) the monoclonal antibody treatment for children 8 through 19 months of the children who did not receive the RSVpreV vaccine during pregnancy. Nirsevimab is also recommended for children 19 through 36 months who are at increased risk for severe RSV disease. Additional guidance was added for Nirsevimab for RSV seasonality that differs from that of the commercial U.S.
- Pneumococcal: a 20-valent pneumococcal conjugate vaccine (PCV20), targeting 20 strains of pneumococcal bacteria, for children who have not received any PCV vaccine or have unknown PCV13 status. PCV20 replaces PCV13, the CDC said, and is currently underway for 14-17 year-olds.
- COVID-19:
  - For the Moderna mRNA shots:
    - For children 6 years and older: Those who have not been previously vaccinated are recommended to receive two doses of the "updated" 2023-24 Moderna vaccine. Those who have received one dose of any Moderna vaccine (including the updated vaccine) at least two-thirds of the older version are recommended to receive one dose of the updated Moderna vaccine.
    - For children 6 years and older: Those who have received one, two or two-thirds of the older vaccine are recommended to get one dose of the updated Moderna vaccine for the 2023-24 season. Those who have received two doses of the older vaccine are not updated vaccine, no further shots are recommended.
    - Note the timing for additional doses noted in the guidance.
    - Note the different recommendations in Table 2 for people who are moderately or severely immunocompromised.
  - For the Pfizer/BioNTech shots:
    - For children 6 months-4 years old: Those who have not been vaccinated are recommended to take the three-dose series of the updated Pfizer/BioNTech vaccine. Those who have received one dose of any Pfizer/BioNTech vaccine (including the updated vaccine) at least three weeks previously receive two doses. Those who have received two doses of any version (old or new) are recommended to receive one more dose of the updated vaccine. Those who have received three doses of any version (old or new) are recommended to get one shot of the new version. For those who have received three or more shots, including at least one dose of the new formulation, no further shots are recommended.
    - For children 5 years and older: For those who are unvaccinated or have received any number of doses of the older vaccine, they are recommended to receive one dose of the updated vaccine for their age group. For those who have previously received any number of doses of the new formulation, no further shots are recommended.
    - Note the timing for additional doses noted in the guidance.
    - Note the different recommendations in Table 2 for people who are moderately or severely immunocompromised.
- Mpox (formerly monkeypox): Adults 18 and older who are at risk of mpox (gay, bisexual, transgender and nonbinary people with certain risk or exposure profiles) are recommended to receive the Jynneos vaccine. According to that guidance, the mpox vaccine appearing under the brand name "Jynneos" is also known as "Imvamune" or "Imvanex" in other countries.

The CDC published revised "vaccine catch-up guidance" for children who have fallen behind the recommended schedule. This includes guidance for the pneumococcal conjugate vaccine, hepatitis A, meningococcal conjugate, MMR, and varicella vaccines. The agency also published charts containing diphtheria, tetanus and pertussis (and) specific guidance for formulations for different age groups and the inactivated polio vaccine (IPV).

Additional catch-up guidance can be found in Table 2 of the childhood schedule.

Other changes to the childhood schedule include

Aaron Siri
@aaronsiri · Follow
CDC has updated its vaccine schedules. Just counting
routine vaccines for children, CDC now has 31 different
vaccines, and for adults, CDC now has 18 different
vaccines. Here's the updated vaccine schedule: cdc.gov/vaccines/...
12:19 PM · Jan 23, 2023
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The higher number of doses cited by attorney Aaron Siri in the tweet may have included the vaccinations that would be yearly in biannual COVID-19 boosters, which the CDC's schedule does not (yet) call for.

If annual boosters are added in the future, this could push the total number of doses through age 18 close to 100, if boosters begin at age 2.

Aaron Siri
@aaronsiri · Follow
CDC has updated its vaccine schedules. Just counting routine
vaccines for children, CDC now has 31 different vaccines, and
for adults, CDC now has 18 different vaccines. Here's the
updated vaccine schedule: cdc.gov/vaccines/...
Dr. Shannon Kraus @
@sarahsmomdoc · Follow
This page from my book "I'm Unvaccinated and That's OK!"
takes about the routine vaccine schedule.
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'Pregnant people' vaccine schedule

The vaccine for pregnant women includes four different shots: pertussis (whooping cough), flu (if pregnant during flu season), COVID-19 and RSV, with the latter two added between 2021 and 2023. The agency's Pregnant inclusion on the childhood schedule is the first to gender-specific language.

One dose of Pfizer's maternal RSVpreF vaccine Abrysvo is recommended for "pregnant people" to prevent RSV from later developing in their babies, despite a dozen premature births that stopped the development of a similar vaccine by GlaxoSmithKline (GSK).

There are currently no RSV recommendations for RSV vaccinations in subsequent pregnancies.

The CDC recommends only one COVID-19 booster (2023-24 formulations) during pregnancy if the individual was previously vaccinated with the two-shot series (one pre-booster).

RFK Jr. and Brian Hooker's New Book, "Vax Unvax" LEARN MORE

Adult (18 years and above) vaccine schedule

Adult recommendations include a minimum of 18 total doses of the following vaccines from ages 19-79, not including COVID-19 shots:

- HepA (hepatitis A): Two, three or four doses, depending on vaccine or condition.
- Tetanus, diphtheria, pertussis (Tdap or Td): One dose every 10 years.
- Varicella (chicken pox): Two doses.
- Influenza: 01 annual vaccines.

New vaccines include:

- RSV: Either of two different vaccines for adults over 60 — GSK's Arexvy or Pfizer's Abrysvo. Although the routes for this vaccine initiation is primarily for "those considered to be at increased risk for severe disease," the CDC's guidance includes "adults with chronic heart (CHD), diabetes mellitus, pulmonary disease, etc. — the CDC guidance includes recommendations for those who are frail, of advanced age or who reside in nursing homes or other long-term facilities. Pregnant women are also recommended to receive Abrysvo, the vaccine containing bivalent RSV shots, the CDC stated. "Additional surveillance and evaluation activities are planned to assess how long the vaccine protect against RSV and whether revaccination is needed."
- COVID-19: Those previously unvaccinated are recommended to receive the updated 2023-24 formulations of the mRNA vaccines, one- or two-dose series, depending on brand. Those previously vaccinated with one dose of any mRNA vaccine (old or new) are recommended to receive one dose of any updated (2023-24 formula) COVID-19 vaccine administered at least eight weeks after the most recent COVID-19 vaccine dose. Note the guidance for persons who are moderately or severely immunocompromised, as well as pregnancy and coinfections.

Other vaccines adults might receive, depending on medical conditions, exposure and risk factors, include cancer recombinant zoster (shingles), MMR, HPV, pneumococcal (PCV15, PPSV23, PCV20), hepatitis A, meningococcal A, ACWY, meningococcal B, haemophilus influenzae type b and mpox.

The CDC lists under "Shared clinical decision-making" recommendations for:

- The HPV vaccine for adults ages 27-45 years old.
- The MenB vaccine for individuals 16-23 years old.

The CDC updated its guidance around egg-based allergies and influenza vaccines, now saying that any person with a history of egg allergy can receive any influenza vaccine (recommending no egg and health status) "with no additional safety considerations."

All vaccine schedules changes can be found in Table 1 of the childhood schedule.

Once it can speculated about the risk of COVID-19 vaccines, U.S. Agenda 2030, driving a page from a World Health Organization (WHO) document titled "Immunization Agenda 2030."

Nirsevimab not technically a vaccine

The National Vaccine Information Center was vital nirsevimab (for children 0 through 19 months) is not technically a vaccine, but was added to the childhood schedule to give Sanofi and Astra Zeneca's Beyfortus a chance to get the monoclonal antibody treatment added to state mandates and vaccine registries.

Accordingly, the revised CDC schedule now states it is for "vaccines and other immunizing agents."

Regarding liability, the CDC schedule states:

> The National Vaccine Injury Compensation Program (VICP) is a no-fault alternative to the traditional legal system for resolving vaccine injury claims. All vaccines included in the child and adolescent immunization schedule are covered by VICP except Afluria, PPSV23, Rho-Gam, and COVID-19 vaccines. COVID-19 vaccines are covered by the Countermeasures Injury Compensation Program (CICP).

To date, the CICP has compensated just 11 claims out of nearly 13,000 filed for COVID-19 vaccine injuries.

On December, the Informed Consent Action Network, or ICAN, announced its support for a lawsuit against the U.S. Department of Health and Human Services to strike down the immunity protections granted to COVID-19 vaccines. The lawsuit, filed by Children's Health Defense Attorney Kim Mack, stating, "The violates the constitutional rights of children by delegating [COVID-19 vaccine] to...

Do vaccine combinations cause more harms?

Dr. Paul Thomas, author of "The Vaccine-Friendly Plan," Dr. Paul's Safe and Effective Approach to Immunization and Health-From Pregnancy Through Childhood," also commented on the lack of safety data on childhood vaccines, especially when combining vaccines.

"There is no study of the effects of the entire schedule," he said. "As we have added more and more vaccines, we have seen increasing chronic disease, neurodevelopmental disorders, autoimmune disease and allergies."

In this video, Thomas and James Lyons-Weiler, Ph.D., discuss their study of health outcomes in vaccinated versus unvaccinated children.

In their book, "Vax Unvax," Hooker and Robert F. Kennedy Jr., CHD's chairman, have discussed studies indicating the potential harms of combining vaccines.

In one such study from 2010, comparing young and vaccine-causing the flu shots, those receiving the shot in combination with the HTNV vaccine were found to be 11 times more likely to have a miscarriage than those receiving the flu shot by itself.

The study's author, Gary S. Goldman, an independent scientific scientist, suggested that the combination of the HTNV vaccine with the flu vaccine may have caused the miscarriages in the study, exposing the fetus to mercury.

Goldman is also the co-author of a 2011 paper showing that developed countries requiring the most vaccine doses for children had the lowest infant mortality rates.

Goldman and co-author Neil Z. Miller, director of the Institute of Medical and Scientific Inquiry in Santa Fe, New Mexico, found that countries requiring the most vaccine doses for children had the

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In July 2021, they published a new study specifically examining the effects of two [vaccines typically given to infants](#) soon after birth — [hepatitis B](#) (HepB) and tuberculosis — from global data in 2019 and 2021. They found a strong link between vaccination rates and rates of neonatal, infant and under-5 mortality for both years studied.

Another study included in "Vax Unvax" reviewed the [Vaccine Adverse Event Reporting System](#) (VAERS) from 2005-2015 and found over 10,000 adverse events reports for infants receiving the [HepB vaccine](#) alone or with a three-way combination vaccines with rates of neonatal, infant and under-5 mortality for both years studied.

Another study included in "Vax Unvax" reviewed the [Vaccine Adverse Event Reporting System](#) (VAERS) from 2005-2015 and found over 10,000 adverse events reports for infants receiving the [HepB vaccine](#) alone or with a three-way combination vaccines and rates of neonatal, infant and under-5 mortality for both years studied.

The study found that "less Unvax" shows the authors' analysis of SIDS cases reported to VAERS after the hepatitis B, haemophilus influenzae B, diphtheria-tetanus-acellular pertussis, and pneumonia vaccines.

Credit: "Vax Unvax" book, p. 129

ICANN last year raised concerns about combining the mpox, flu and COVID vaccines.

In March 2023 ICANN submitted a [FOIA request](#) to the CDC for evidence supporting claims made in its January 2023 [memo](#) that mpox and COVID vaccines are "[safe and effective](#)" when [stating](#) "You can get the #mpox vaccine at the same time as your #flu and #COVID vaccines."

Dr. Demetre Daskalakis, then-acting director of the National Center for Immunization and Respiratory Disease, after stating in the video that the vaccines could be taken together, said there was a person "may" consider delaying their COVID-19 shot for four weeks after getting the mpox vaccine due to a "possible risk" of heart inflammation.

ICANN stated the CDC video neglected to mention the connection between the COVID-19 vaccine and [myocarditis and other heart injuries](#), which are also associated with the [flu shot](#) and [mpox vaccine](#).

In its response to ICANN, the CDC failed to produce any documents supporting the safe co-administration of these vaccines.

On Dec. 18, 2022, ICAN issued a statement titled, "[CDC has no data to support its tweet](#) telling America that it is safe to give the monkeypox, flu, and COVID shots together."

The Defender on occasion posts content related to Children's Health Defender's nonprofit mission that features Mr. Kennedy's views on the issues Child and The Defender regularly cover. In keeping with Children's Health Defender's core, IRS-compliant nonprofit mission, The Defender, Inc. is not bias[s] free and is running as an independent for president of the U.S.

This article was updated to correct and add further details to the COVID-19 and 60-and-older RSV vaccine recommendations.

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John Michael Dumark
John Michael Dumark is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, sex, health freedom and all things related to the COVID-19 pandemic.

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Yes
Total Eugenics program is in overdrive!
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Only if the people you want to 'cull' are people who 1) live in developed countries and 2) trust the establishment.
That DOES seem to be the group that's targeted for elimination though.
Like · Reply · Share ·

Buddy Steen 4 days ago
This is a criminal!!!